PTO:SB/22 (11-07)
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For LINEAR SAW WITH STAB-CUT BEVEL CAPABILITY Art Unit 3724 Examiner Kenneth Peterson This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): Fee Small Entity Fee One month (37 CFR 1.17(a)(1)) \$120 \$80 \$ Two months (37 CFR 1.17(a)(2)) \$460 \$230 \$ Three months (37 CFR 1.17(a)(3)) \$1050 \$525 \$ Four months (37 CFR 1.17(a)(4)) \$1640 \$820 \$ Five months (37 CFR 1.17(a)(5)) \$2230 \$1115 \$2230 Applicant claims small entity status. See 37 CFR 1.27. A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account.	PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)	Docket Number (Optional)		
For LINEAR SAW WITH STAB-CUT BEVEL CAPABILITY Art Unit 3724 Examiner Kenneth Peterson This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a repty in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): Fee		ALPI-18833		
Art Unit 3724 Art Unit 3724 This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): Fee	Application Number 10/681,884	Filed 10/08/2003		
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One month (37 CFR 1.17(a)(1)) \$120 \$80 \$ Two months (37 CFR 1.17(a)(2)) \$460 \$230 \$ Two months (37 CFR 1.17(a)(3)) \$1050 \$525 \$ Four months (37 CFR 1.17(a)(4)) \$1640 \$820 \$ X Five months (37 CFR 1.17(a)(5)) \$2230 \$1115 \$ \$2230 Applicant daims small entity status. See 37 CFR 1.27. A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number	This is a request under the provisions of 37 CFR 1.138(a) to extend the period for filing a reply in the above identified application.			
Cone month (37 CFR 1.17(a)(1)) \$120 \$800 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
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Three months (37 CFR 1.17(a)(3)) \$1050 \$525 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	One month (37 CFR 1.17(a)(1)) \$120	\$60 S		
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attorney or agent under 37 CFR 1.34 Registration number if acting under 37 CFR 1.34 March 21, 2008	assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).			
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	Signature			
	Peter V. Schroeder	214-220-0444	1	
NOTE: Signatures of all the inventors or assignees of record of the ortire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.				
Total of forms are submitted. is collection of information is required by 37 CFR 1,136/a). The information is required to obtain or relain a beneaff by the public which is to file for the time.				

This collection of information is required by 37 CPR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO promose) an application. Confidentiality is governed by \$3.U.S.O. 122 and 37 CPR.1.11 and 1.1.4. This collection is estimated to late of minutes to complete, including gallering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any committee on the second of time you require to complete the form and/or supportions for reducing the thorse, should be sent to the Chief Information Officer, or the control of time you require to complete the formation's supportions for reducing the twinners, about the sent to the Chief Information Officer, or the control of the USP Complete the Chief Control of Committees or the Chief Information, VA 22313-1460. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEINT DTC. Commitstoomer for Patients, P.O. BOS 1450, Alexandria, VA 22331-1460, VA 2331-1460.